TEXTBOOK WAIVER AUTHORIZATION

IC 20-26-12-28

(a) After giving the advisory committee . . . an opportunity to give its recommendation, the governing body of a school corporation may request a waiver from the adoption requirements of this chapter if it believes that the educational needs of the students attending that school corporation can best be served by:

    (1)   adopting no textbook; or

    (2)   adopting a textbook that has not been adopted by the board under this chapter.

(b) A request for a waiver must be submitted on a form approved by the state board before June 1 of the year preceding the first school year for which the waiver is to apply.

(c) The state board of education shall grant the waiver if it determines that the request is reasonable.

INSTRUCTIONS FOR COMPLETING THE TEXTBOOK WAIVER APPLICATION

A separate form must be used for each waiver requested, unless the waiver is for several grade levels: i.e., Grades 1-6.   Waivers are needed only for those textbook categories in which there has been a state adoption. Categories not listed on the Official Adoption List are exempt categories and schools may adopt any textbook that meets their curriculum requirements. Special Education classes, Gifted and Talented classes, remedial, and Advanced Placement courses are also exempt. Waivers are not needed for kindergarten classes.

Waivers are necessary only for core materials that will be used in place of materials on the official list. Waivers are not for supplemental materials or materials that are used to support the core material.

Applicants may attach additional pages if space on the form is not adequate.

SECTION I - Identification

All items of information must be completed.

The school corporation number can be found in the Indiana School Directory or by checking with the school corporation's business manager.

SECTION II - Waiver Information

The category number(s) can be found on the official state adoption list.
The course title should be the same as found on the official state adoption list.

In the case of a series, such as in elementary spelling, more than one category may be included on this form.

SECTION III - Type of Waiver

Check appropriate blank and complete the form as indicated in this section.

SECTION IV - Textbook(s) to be Used

The ISBN number can be found on the cover or title page of the textbook. ISBN numbers do not need to be listed for series of trade books.

SECTION V - Rationale

A brief rationale needs to be written in the space provided. Curriculum guides or information about the course may be attached.

SECTION VI - Authorization

Minutes from the meeting of the local governing body's (school board) approval of the waiver request must be attached. If this is not available at the time this form is submitted, the minutes may be submitted later.

TEXTBOOK ADOPTIONS
Room 229, State House
Indianapolis, Indiana 46204-2798

TEXTBOOK WAIVER APPLICATION FORM
(SUBMIT ONE FORM FOR EACH WAIVER REQUEST)
DUE BY June 1

SECTION I - IDENTIFICATION		
SCHOOL CORPORATION NAME		SCHOOL CORPORATION NUMBER
STREET ADDRESS	CITY	ZIP CODE
LOCAL CONTACT PERSON		TITLE
ADDRESS		TELEPHONE NUMBER

SECTION II - WAIVER INFORMATION
A TEXTBOOK WAIVER IS REQUESTED IN CATEGORY NUMBER_____FOR COURSE_____   AT GRADE(S)_____BEGINNING WITH YEAR 20_____AND FOR_____SUBSEQUENT YEARS.   WILL THIS WAIVER INVOLVE ALL SCHOOLS IN THE CORPORATION?_____   IF NOT, PLEASE ATTACH NAMES OF THE SCHOOLS TO WHICH THE WAIVER APPLIES.

SECTION III - TYPE OF WAIVER
PLEASE CHECK ONE - THIS REQUEST IS FOR: (1)_____ USE OF NO TEXTBOOK.   (2)_____ USE OF TEXTBOOK(S) NOT ON THE OFFICIAL STATE ADOPTION LIST.

SECTION IV - TEXTBOOK(S) TO BE USED			
ISBN	PUBLISHER	TITLE	COPYRIGHT DATE

SECTION V - RATIONALE

Please describe why this waiver is requested. Explain how the requested material meets the instructional objectives of your school=s course/program. Document your answer by attaching your course/program instructional objectives, if necessary.

SECTION VI - AUTHORIZATION

ATTACH A COPY OF THE LOCAL GOVERNING BODY=S APPROVAL FOR THIS WAIVER REQUEST

_____   _____

Superintendent's Name   Application Date

_____   _____

Superintendent's Signature   Telephone Number